



A Newsletter of the
PHARMACY EXAMINING BOARD

February, 2005

THE WISCONSIN
PHARMACY
EXAMINING BOARD



Members of the Board:

Michael J. Bettiga, R.Ph., Chair (Green Bay)
Susan L. Sutter, R.Ph., Vice Chair (Horicon)
Charlotte Rasmussen, Secretary (Stanley)
Cynthia Benning, R.Ph., (Belgium)
John P. Bohlman, R.Ph., (Boscobel)
Georgina Forbes (Madison)
Fred Moskol, R.Ph., (Madison)

Administrative Staff:

Tom Ryan, Bureau Director
William Black, Legal Counsel
Kim Nania, Division Administrator

Executive Staff

Sandra Rowe, Deputy Secretary
Chris Klein, Executive Assistant

CONTROLLED SUBSTANCES SECURITY

It is the responsibility of each facility to maintain a secure location to deter thefts and losses. The Department of Regulation and Licensing (DRL), on behalf of the Pharmacy Examining Board (PEB), receives reports from the Drug Enforcement Administration (DEA) on all reported thefts and losses from pharmacies, distributors, manufacturers, and others with special use permits. Over the past several years we have identified some trends. Here are some approximate percentages on the leading causes of drug thefts and losses that we see: employee pilferage (37%); break-ins and robberies (18%); drugs lost in transit with common carriers (9%); and losses from contingency boxes located in other facilities (7%).

As a licensee you are responsible for the security in your facility. Here are some typical actions facilities have reported to us that they took after suffering a theft or loss:

Employee pilferage:

- Put a perpetual inventory in place. (Note: maintaining a perpetual inventory does not fulfill the requirements of performing a biennial inventory required by 21 CFR § 1304.11.)
- Verify dispensed quantity twice.
- Do a monthly narcotic count, random checks, and yearly audit of all stock.
- Keep all schedule II's in a locked cabinet, away from windows, and access from outside the pharmacy area.
- Fill prescriptions on a counter where other employees are working and can observe.
- Do not leave drugs out; return to a secure location after use.
- Use automated dispensing cabinets, such as Pyxis.
- Reposition cameras to cover all work areas, counters, cabinets, etc.

In This Issue

Board and Staff Member Listings	1
Controlled Substances Security	1-2
Electronic Signatures.....	2-4
Central Fill Rules	4-5
Pharmacist Absence Rule Change.....	5
Insurers Required DEA Number for Claims Processing.....	5
Pseudoephedrine Sales	5-6
Foreign Graduate Internships.....	6
Wisconsin PEB Statement of Policy Re: DEA Interim Policy Statement	6
Canadian Pharmacy Plan.....	6
Disciplinary Actions	7-11
DRL Access and Information.....	12

- Remind supervisors to watch for suspicious behavior by employees and deal with it as soon as possible.
- Conduct random drug tests for employees suspected of drug use.
- Monitor non-pharmacy personnel in the pharmacy area – cleaning crews, maintenance staff, etc.
- File a police report immediately after the theft or loss is discovered.

Break-ins and robberies:

- Change locks after a robbery; review the list of who has keys.
- Install bars over all the windows and glass doors.
- Reposition cameras to cover doors, windows, pharmacy counter area, etc.
- Have the alarm company relocate motion detector(s) and add additional detectors.
- Install a silent alarm to the police and/or security company, place a loud audible alarm in the facility, and place a strobe light in the facility.

Drugs lost in transit with common carriers:

- Review shipping and delivery procedures with all staff.
- Double count all shipments, checking for tampering and damage.
- Increase packaging materials.
- Require all deliveries to be made to a person, not left unattended.
- Use chain of custody forms.
- Report anything missing immediately to the carrier and the DEA.

Contingency boxes:

- Review procedures with all staff involved.
- Only put enough stock in the contingency box for one day; do not put excessive quantities in the box.
- Use tamper proof blister packages.

The procedure and two forms needed in the event of a theft or loss (DEA Form and the DRL Supplemental Form for Reporting Theft or Loss of Controlled Substances) can be found on the DRL's website at <http://drl.wi.gov/prof/phas/form.htm>.

ELECTRONIC SIGNATURES

By William Black

Pharmacy Examining Board Legal Counsel

The question has arisen as to the latitude of the pharmacist in accepting an electronic signature for purposes of dispensing an electronically transmitted prescription order pursuant to Wis. Admin. Code § Phar 7.08. The following is a guideline for use to determine the sufficiency of an electronic signature, and the sufficiency of a designation that the order is transmitted electronically.

Common types of prescription order preparation and transmission

Wis. Admin. Code § Phar 7.08 (1) provides in part: "...prescription orders may be accepted and dispensed if they have been transmitted electronically from a practitioner or his or her designated agent to a pharmacy via computer modem or other similar electronic device."

Therefore, the electronic transmission rule results in an order being considered "electronic" for purposes of the rule based on how it is transmitted from the practitioner's office.

Accordingly, set forth below are four types of commonly encountered prescription order scenarios, only the first two are considered "electronic" and allowable under Wis. Admin. Code § Phar 7.08.

Scenario #1 is the most likely instance where a pharmacist will encounter an electronically transmitted prescription order, yet, it will involve a facsimile machine at the pharmacy:

1. Prescription order from practitioner office electronically generated from a computer or handheld device and sent via a modem, or other computer device, ARRIVING at the pharmacy FACSIMILE MACHINE, as a peripheral. = Electronic order. (Electronic signature is required.)

In scenario #2, an electronically transmitted prescription order is sent from a practitioner computer to a pharmacy computer. This was the original concept which prompted the electronic transmission rule:

2. Prescription order from practitioner office electronically generated from a computer or handheld device and sent via a modem, or other computer device, ARRIVING at the pharmacy COMPUTER. = Electronic order. (Electronic signature is required.)

In scenario #3, if the prescription order is printed out or written in hard copy form at the practitioner's office and placed in the practitioner's facsimile machine for transmission to the pharmacy, it is a facsimile order:

3. Written/typed/or computer printed prescription order on hard copy paper placed into a facsimile machine at a practitioner's office and transmitted to the pharmacy which is received at the pharmacy's facsimile machine. = Facsimile order which must meet the requirements of a written prescription order, including a handwritten signature. This type of order must also all meet the requirements of Wis. Admin. Code § Phar 8.12, for faxed prescription orders. Take special note of the restrictions contained in section Phar 8.12 on faxing prescription orders for schedule II controlled substances.

In scenario #4, any hard copy order handed to a patient at the practitioner's office is ALWAYS considered a written prescription order.

4. Written/typed/or computer printed prescription order on hard copy paper placed into hands of a patient at a practitioner's office which is thereafter presented at the pharmacy. = Written prescription order. Handwritten signature is required.

Sufficiency of an electronic signature

1. The pharmacy may maintain a practitioner signature file for comparison where a computer generated facsimile signature is affixed. By pre-agreement with the pharmacist a practitioner may place a signature on file for comparison.

2. The pharmacy may also maintain a code or name file from practitioners wishing to use electronic transmission utilizing a signature that is a printed practitioner name, alpha numeric string or other numbering system for validation, but not constituting public key infrastructure. The signature, in whatever form, cannot be affixed by default, rather the practitioner must perform an affirmative act to affix the signature, contemporaneously with the electronic transmittal of the prescription order.

3. Vendors of such systems can assist the acceptance process by educating practitioners to contact a pharmacy prior to using any system in order to obtain agreement regarding: (a) form and content of the order, (b) assuring the pharmacist of the non default application of a signature for the

system used, and; (c) any other security measures used with the electronic transmission system. A public key infrastructure (Note, you may see this referred to in technology literature as "PKI") system could certainly be used by agreement but is not required.

Designation of electronic transmission

The prescription order must bear the designation, "electronically transmitted prescription", or with similar words or abbreviations to that effect. Wis. Admin. Code § Phar 7.08 (2)(c).

The phrases, "electronically ordered by" or "electronically authorized by" constitute similar words "to that effect".

Samples of valid electronic signatures

If the prescription order is deemed an electronic order, the following types of electronic signatures are permissible (not an all inclusive list) :

- "electronically ordered by Dr. Smith"- If the field, "Dr. Smith" is not a default, rather attached by the practitioner contemporaneously with transmission.
- "electronically authorized by Dr. Smith"- If the field, "Dr. Smith" is not a default, rather attached by the practitioner contemporaneously with transmission.
- "Dr. Smith"- If the field, "Dr. Smith" is not a default, rather attached by the practitioner contemporaneously with transmission.
- "signed by Dr. Smith"- If the field, "Dr. Smith" is not a default, rather attached by the practitioner contemporaneously with transmission.
- "1X#aW874, or similar code to which you have direct electronic access or authentic knowledge connecting the code exclusively to a practitioner"- If the field is not a default, rather attached by the practitioner contemporaneously with transmission.
- "*Dr. Smith*"- If the field is not a default, rather attached by the practitioner contemporaneously with transmission.

NOTE: The pharmacist must practice sound professional judgment in determining if a field "is not a default, rather attached by the practitioner contemporaneously with transmission". This is not a casual decision on the part of the pharmacist and may need to be confirmed if there is any suspicion this criterion is not met. However, the burden of

proof lies with the practitioner; ie, having made some confirming statement or attestation the “no default” criterion has been met.

Controlled Substances - IMPORTANT

REMINDER- The DEA does not currently allow the electronic transmission of prescription orders for controlled substances.

The DEA considers the electronic transmission of a prescription order for a controlled substance to be an “oral” order. The DEA states that in this instance local state law regarding oral orders will control how the order is handled.

CENTRAL FILL RULES

The following rules were effective as of December 1, 2003, for any Wisconsin pharmacy that would like to have a central fill relationship with another Wisconsin licensed pharmacy. For a Wisconsin pharmacy to have a central fill relationship with a non-Wisconsin licensed pharmacy, the pharmacy must submit a request to the Board for a variance to Phar 7.01.

Phar 7.12 Central fill pharmacy.

(1) In this section:

(a) "Central fill pharmacy" means a pharmacy licensed in this state acting as an agent of an originating pharmacy to fill or refill a prescription.

(b) "Originating pharmacy" means a pharmacy licensed in this state that uses a central fill pharmacy to fill or refill a prescription order.

(2) A central fill pharmacy and originating pharmacy may process a request for the filling or refilling of a prescription order received by an originating pharmacy only pursuant to the following requirements:

(a) The central fill pharmacy either has the same owner as the originating pharmacy or has a written contract with the originating pharmacy outlining the services to be provided and the responsibilities of each pharmacy in fulfilling the terms of the contract in compliance with federal and state law.

(b) The central fill pharmacy shall maintain a record of all originating pharmacies, including name, address and DEA number, for which it processes a request for the filling or refilling of a prescription order received by the originating pharmacy. The record shall be made available upon request for inspection by the board or its agent.

(c) The central fill pharmacy and originating pharmacy maintain a written filling protocol delineating each pharmacy's assumption of

responsibility for compliance with the prescription drug compounding and dispensing requirements of this chapter and ch. Phar 8.

(d) The originating pharmacy shall remain responsible for compliance with the prescription drug compounding and dispensing requirements of this chapter and ch. Phar 8, and which are not assumed in writing by the central fill pharmacy pursuant to a written filling protocol.

(e) The originating pharmacy shall at all times remain solely responsible to perform and comply with the requirements of s. Phar 7.01 (1) (e) and (em).

(f) Unless the central fill pharmacy shares a common central processing unit with the originating pharmacy, it may not perform processing functions such as the medication profile record review of the patient, drug initialization review, refill authorizations, interventions and drug interactions.

(g) The prescription label attached to the container shall contain the name and address of the originating pharmacy as the licensed facility from which the prescribed drug or device was dispensed for purposes of s. 450.11 (4) (a) 1., Stats. The date on which the prescription was dispensed for purposes of s. 450.11 (4) (a) 2., Stats., shall be the date on which the central fill pharmacy filled the prescription order.

(h) The originating pharmacy shall maintain the original of all prescription orders received for purposes of filing and recordkeeping as required by state and federal law.

(i) The central fill pharmacy shall maintain all original fill and refill requests received from the originating pharmacy and shall treat them as original and refill prescription orders for purposes of filing and recordkeeping as required by state and federal law.

(j) In addition to meeting the other recordkeeping requirements required by state and federal law, the central fill pharmacy and originating pharmacy shall each maintain records to identify each of its pharmacists responsible for receiving and reviewing prescription orders and compounding and dispensing pursuant to a prescription order and track the prescription order during each step in the dispensing process.

(k) The central fill pharmacy and originating pharmacy shall adopt a written quality assurance program for pharmacy services designed to objectively and systematically monitor and evaluate the quality and appropriateness of patient care, pursue opportunities to improve patient care, resolve identified problems and insure compliance with this section.

(l) The originating pharmacy shall provide the patient with the name and address of the central fill

pharmacy and obtain consent as required by applicable state and federal law.

History: CR 01-075: cr. Register November 2003 No. 575, eff. 12-1-03

PHARMACIST'S ABSENCE RULE CHANGE

The Board has modified Phar 6.04(3) to allow a pharmacist to leave the pharmacy professional area for one half hour or less under certain conditions without requiring the pharmacy to secure a barrier.

Phar 6.04(3)

(3) PROFESSIONAL SERVICE AREA REQUIREMENTS WHERE PHARMACIST IS ABSENT.

(a) Except as provided in par. (c), if no pharmacist is present in the professional service area, a pharmacy may convert to a non-prescription or sundry outlet if the following requirements are met:

1. A secured, physical barrier surrounds the professional service area of the pharmacy and precludes access to the area by unlicensed personnel. A secured barrier may be constructed of other than a solid material with a continuous surface. If constructed of other than a solid material, the openings or interstices in the material shall not be large enough to permit removal of items from the professional service area by any means. Any material used in the construction of the barrier shall be of sufficient strength and thickness that it cannot be readily or easily removed, penetrated or bent. The plans and specifications of the barrier shall be submitted to the board for approval.

2. The barrier is locked in the absence of the pharmacist.

3. A patient's telephone request to renew a certain prescription may be accepted, but a telephone message from a practitioner giving a new prescription order or renewal authority may not be accepted.

5. Signs of reasonable size are posted at the entrance of the building and the professional service area prominently displaying the hours the pharmacist will be on duty.

6. The manner in which the telephone is answered does not imply that the location is, at that time, operating as a pharmacy.

7. The pharmacy examining board office is notified of the hours during which the establishment is operated as a sundry outlet.

(b) The managing pharmacist is responsible for compliance with all professional service area security requirements.

(c) Where no pharmacist is present in the professional service area a pharmacy is not required to convert to a non-prescription or sundry outlet if the following requirements are met:

1. The pharmacist is absent for a time period of one half hour or less.

2. The pharmacist must be accessible for communication with the remaining pharmacy staff by phone, pager or other device.

3. The pharmacy must indicate that the pharmacist is not available in the professional service area and indicate the period of absence and the time of the pharmacist's return.

4. Pharmacy technicians may only perform duties allowed by s. Phar 7.015 (2)

INSURERS REQUIRING DEA NUMBERS FOR CLAIMS PROCESSING

Recently the PEB received a letter from the Wisconsin Optometric Association concerning a problem that doctors of optometry have been facing with pharmacies refusing to fill their prescriptions for non-controlled substances unless they provide the pharmacy with a DEA number. Many optometrists have found that they can manage their patients without the use of controlled substances and have opted to not seek DEA registration. The Board is aware the pharmacists are put in a difficult position because of the expectation of processing a claim for insurance reimbursement that may require a DEA number. The extent a pharmacist chooses to assist a patient with resolving an insurance issue is their decision, but the patient and/or prescriber should never be left with the impression the prescription is not valid or is being refused.

PSEUDOEPHEDRINE SALES

In an effort to assist in reducing the diversion of pseudoephedrine, pharmacists are reminded of the retail thresholds established by the Methamphetamine Control Act of 1996. Retail thresholds for 9 gram transactions are as follows (note: one tablet less makes the transaction non-regulated):

- 120mg pseudoephedrine HCl = 92 tablets
- 60mg pseudoephedrine HCl = 184 tablets
- 30mg pseudoephedrine HCl = 367 tablets

Retail thresholds for 3 gram package size are as follows:

- 120mg pseudoephedrine HCl = 31 tablets
- 60mg pseudoephedrine HCl = 62 tablets

- 30mg pseudoephedrine HCl = 123 tablets

Pharmacies can assist the DEA by establishing sale quantity limits, implementing electronic register controls, and by posting signs notifying customers of store policies that place restrictions on the sale of pseudoephedrine products. Additional steps to prevent diversion should be taken by educating store employees concerning the restrictions and informing them of their responsibility to report suspicious activities. These retail thresholds for pseudoephedrine sales apply to all retail outlets, such as gas stations, convenience stores, mass merchants, etc., not just pharmacies.

FOREIGN GRADUATE INTERNSHIPS

The Pharmacy Examining Board took over responsibility for internships on January 1, 2002. Pharmacists and pharmacy license owners are reminded to review Chapter Phar 17 for the requirements of internship. Pharmacies recruiting foreign graduates to Wisconsin must insure that the foreign graduate has filed an application with the Board prior to performing duties as an intern. Any work performed before the application is filed is unlicensed practice and the foreign graduate cannot receive credit for those hours. The most efficient way to have a foreign graduate intern, postgraduate intern, or out-of-state pharmacist waiting for licensure to prove they have filed an application with the DRL is to have them go to the website and print out their checklist showing the status of their application. A checklist is never started for a candidate that has not filed an application.

WISCONSIN PHARMACY EXAMINING BOARD

Statement of Policy Regarding the Drug Enforcement Administration's November 16, 2004 Interim Policy Statement titled "Dispensing of Controlled Substances for the Treatment of Pain"

The Wisconsin Pharmacy Examining Board remains committed to the longstanding collaborative working partnership with the DEA in jointly acting to protect the citizens of Wisconsin. As part of this ongoing partnership the Wisconsin Pharmacy Examining Board wishes to express its concerns regarding the publication of the DEA's recent November 16, 2004, Interim Policy Statement titled "Dispensing of Controlled Substances for the Treatment of Pain." ("Statement")

The Statement takes a position contrary to years of accepted practice regarding the propriety of a prescriber issuing three prescription orders for a Schedule II controlled substance on a specific date, and indicating on those orders that one is for immediate filling, one is to be filled in 30 days, and one is to be filled in 60 days. (Hereafter described as the "3/60 practice") The DEA states that the 3/60 practice is "tantamount" to a refill for a Schedule II controlled substance. The federal Controlled Substances Act, prohibits the refill of a prescription order for a Schedule II controlled substance.

The Board does not agree with the DEA's current interpretation of law regarding the 3/60 practice.

Accordingly, at this time the Board considers the continuance of the 3/60 practice to be lawful under both Wisconsin and federal law, when used for legitimate medical purposes. This position will continue to guide the Board, working in cooperation with the Department of Regulation and Licensing's Division of Enforcement, in its review of the relevant practice of Wisconsin licensees.

Pharmacy risk management officers desiring to comply with the Statement are advised to contact the DEA for further clarification regarding what the DEA expects pharmacists to do when presented with a 3/60 prescription order scenario. (PatriciaGood@usdoj.gov)

Persons wishing to address comments to the DEA about the Statement may do so at: dea.diversion.policy@usdoj.gov

CANADIAN PHARMACY PLAN

The PEB has been made aware of mailings to Wisconsin pharmacies inviting them to partner with a Canadian pharmacy to provide prescriptions filled in Canada to patients in Wisconsin. The Board reminds licensees that Phar 10.03 (1) states that unprofessional conduct includes administering, dispensing, supplying or obtaining a drug other than in legitimate practice, or as prohibited by law.

DISCIPLINARY ACTIONS

The disciplinary summaries are taken from orders that can be reviewed on the Department of Regulation and Licensing Web site: www.drl.state.wi.us. Click on "Publications" and then "Reports of Decisions" to view the order. Decisions reported below may have an appeal pending and the discipline may be stayed. The current status of the discipline may be viewed on the Department's Web Site under "License Lookup," by calling (608) 266-2112, or by checking the progress of cases in court at: www.courts.state.wi.us.

Definitions:

"Limit" means to impose conditions and requirements upon the holder of the credential, and to restrict the scope of the holder's practice.

"Reprimand" means to publicly warn the holder of a credential.

"Revoke" means to completely and absolutely terminate the credential and all rights, privileges and authority previously conferred by the credential.

"Suspend" means to completely and absolutely withdraw and withhold for a period of time all rights, privileges and authority previously conferred by the credential.

"Costs" means the compensation and reasonable expenses of hearing examiners and of prosecuting attorneys for the department, examining board or affiliated credentialing board, a reasonable disbursement for the service of process or other papers, amounts actually paid out for certified copies of records in any public office, postage, telephoning, adverse examinations and depositions and copies, expert witness fees, witness fees and expenses, compensation and reasonable expenses of experts and investigators, and compensation and expenses of a reporter for recording and transcribing testimony.

HEALTH PHARMACIES INC

MADISON WI REPRIMAND/LIMITED/COSTS

Failed to comply with an earlier disciplinary order of the board placing limitations on compounding prescription drugs to be administered to patients by practitioners. Dated 6-24-2004. Wis. Stat. 450.10(1)(a)6. and 8.; Wis. Adm. Code Phar 10.03(2). Case #LS0401071PHM

SNITEMAN PHARMACY INC

NEILLSVILLE WI

REPRIMAND/LIMITED/FORFEITURES/COSTS

A pharmacy alarm system was not installed at the pharmacy. An inspection by the U.S. Drug Enforcement Administration revealed an inadequate biennial inventory of controlled substances, record keeping violations, drugs dispensed without a prescription order and medications dispensed without patient consultation. Dated 10-08-2002. Wis. Stat. 450.10(1)(a)2. and 6.; Wis. Adm. Code Phar 6.08, 7.01(1)(e), 8.02(1), 8.05(1), 10.03(2). Case #LS0210084PHM

DAVID C KLIEFORTH RPH

NEILLSVILLE WI FORFEITURES/COSTS

A pharmacy alarm system was not installed at the pharmacy. An inspection by the U.S. Drug Enforcement Administration revealed an inadequate biennial inventory of controlled substances, record keeping violations, drugs dispensed without a prescription order and medications dispensed without patient consultation. Dated 10-08-2002. Wis. Stat. 450.10(1)(a)2. and 6.; Wis. Adm. Code Phar 6.08, 7.01(1)(e), 8.02(1), 8.05(1), 10.03(2). Case #LS0210084PHM

WILLIAM C WEILER RPH

NEILLSVILLE WI

REPRIMAND/FORFEITURES/COSTS

A pharmacy alarm system was not installed at the pharmacy. An inspection by the U.S. Drug Enforcement Administration revealed an inadequate biennial inventory of controlled substances, record keeping violations, drugs dispensed without a prescription order and medications dispensed without patient consultation. Dated 10-08-2002. Wis. Stat. 450.10(1)(a)2., and 6.; Wis. Adm. Code Phar 6.08, 7.01(1)(e), 8.02(1), 8.05(1), 10.03(2). Case #LS0210084PHM

ANN E MOORE RPH

OSHKOSH WI

REPRIMAND/FORFEITURES/COSTS

On eight occasions when Moore was the managing pharmacist of Vencare Pharmacy Services in New Berlin, the pharmacy used emergency dispensing procedures but failed to obtain a signed prescription order containing the words "authorization for emergency dispensing" as required by law. Dated 11-12-2002. Wis. Stat. 450.10(1)(a)2.; Wis. Adm. Code Phar 8.02(1), 8.09(4), 10.03(7). Case #LS02111202PHM

**KINDRED PHARMACY SERVICES
NEW BERLIN WI
REPRIMAND/COSTS**

Pharmacy had no record of a beginning inventory when the pharmacy changed its location. Dated 11-12-2002. Wis. Stat. 450.10(1)(a)2.; Wis. Adm. Code Phar 8.02(1), 8.09(4), 10.03(7). Case #LS0211121PHM

**SNYDERS DRUG STORE #5003
PADDOCK LAKE WI
REPRIMAND/COSTS**

Failed to provide timely notification to the DEA, local police, and the board of a theft by a relief pharmacist. Dated 1-14-2003. Wis. Adm. Code Phar 8.02(3)(f), 10.03(7). Case #LS0301141PHM

**DAVID W WHITE RPH
CINCINNATI OH
SUSPENDED/COSTS**

Previously disciplined by the Ohio State Board of Pharmacy after setting up a false patient profile and creating false and/or knowingly possessing a false or forged prescription. Shall not renew or attempt to renew his license in Wisconsin until he has fully complied with the terms of the Ohio board order and has an unrestricted license in the state of Ohio. Dated 1-14-2004. Wis. Adm. Code Phar 10.03(17). Case #LS0401147PHM

**HAROLD E MCEUEN RPH
ONALASKA WI
COSTS**

Received a telephone prescription order which was incorrect and dispensed the wrong drug to a patient without checking with the prescriber. Dated 10-08-2002. Wis. Stat. 450.10(1)(a)6.; Wis. Adm. Code Phar 7.01(e) and (em), 10.03(2), 16.02, 16.06. Case #LS0210082PHM

**OSCO DRUG #5020
MARINETTE WI
FORFEITURES/COSTS/REPRIMAND**

Operated a pharmacy without a managing pharmacist for 44 days. Dated 11-12-2002. Wis. Stat. 450.09(1). Case #LS02111203PHM

**PHILLIPS HEALTH CARE CENTER PH
REEDSBURG WI
REPRIMAND**

Inspectors found that prescription labels did not list manufacturer or distributor of the drug or drug product dispensed; pharmacy didn't have a balance that conformed to the specifications of the rule; and Schedule II controlled substances were kept separate from other drugs in an unlocked cabinet. Dated 12-

10-2002. Wis. Adm. Code Phar 6.06(1)(a), 6.07(3), 7.02. Case #LS0212102PHM

**PATRICK J COLLINS RPH
REEDSBURG WI
FORFEITURES/COSTS**

Inspectors found that prescription labels did not list manufacturer or distributor of the drug or drug product dispensed; pharmacy didn't have a balance that conformed to the specifications of the rule; and Schedule II controlled substances were kept separate from other drugs in an unlocked cabinet. Dated 12-10-2002. Wis. Adm. Code Phar 6.06(1)(a), 6.07(3), 7.02. Case #LS0212102PHM

**THOMAS J PHILLIPS RPH
DELAFIELD WI
REPRIMAND/SUSPENDED/LIMITED/FORFEI
TURES/COSTS**

Dispensed medications to himself and his wife without a prescription order or any other authority and created a telephone prescription order for the medications from a physician who had no knowledge of the order. Dated 11-21-2002. Wis. Stats. 450.10(1)(a)2., 450.11(1), (7)(a); Wis. Adm. Code Phar 10.03(1), (2), (5). Case #LS0211212PHM

**CRAIG M PHILIPS RPH
MADISON WI
STAYED SUSPENSION/LIMITED/COSTS**

Admitted to diverting prescription drugs from his employer. Dated 10-08-2002. Wis. Stat. 450.10(1)(a)3. Case #LS0210083PHM

**GILLIAM R SANFORD RPH
EAU CLAIRE WI
REPRIMAND/LIMITED/COSTS**

In April, 2003, entered into a plea agreement by which he pled no contest and was found guilty and convicted of a class A misdemeanor, exposing genitals to a child. A felony count of child enticement-expose sex organ was dismissed. Sentence was withheld and he was placed on probation for 2 years. In lieu of 30 days in jail, ordered to perform 240 hours of community service. Conditions of probation included counseling as directed by probation officer, no contact with victim or family, and restitution for victim care, if any. His probation officer required him to enter sex offender treatment; to attend group treatment; to begin individual sex offender treatment. He has complied with his probation officer's directions regarding treatment. Dated 12-10-2003. Wis. Stat. 450.10(1)(a)2. Case #LS0312102PHM

FIRST COMMUNITY CARE LLC**WAUKESHA WI****REPRIMAND/FORFEITURES/COSTS**

An inspection revealed an incomplete policy and procedure manual, failure to document receipt, inventory or disposition of all prescription drugs and devices, and no alarm system on an overhead garage door. Dated 10-08-2002. Wis. Adm. Code Phar 13.10(4), 13.14(1), 13.15. Case #LS0210081PHM

GREGORY J TECHE RPH**JANESVILLE WI****SUSPENDED/COSTS**

Diverted several controlled substances from pharmacy stock for his personal use. Dated 11-12-2002. Wis. Stat. 450.10(1)(a)3.; Wis. Adm. Code Phar 10.03(1). Case #LS02111205PHM

CHARLES E HALL RPH**SAUK CITY WI****REPRIMAND/FORFEITURES/COSTS**

Allowed an unlicensed person to dispense prescriptions to a patient without providing a consultation. Dated 2-12-2003. Wis. Stat. 450.10(1)(a)6.; Wis. Adm. Code Phar 7.01(1)(d) and (e), 10.03(2). Case #LS0302121PHM

SCHNUCKS PHARMACY #758**JANESVILLE WI****REPRIMAND/FORFEITURES/COSTS**

Maintained incomplete schedule V controlled substances registers. Dated 6-24-2004. Wis. Stat. 450.10(1)(a)2., (1)(b)1., 961.23(4); Wis. Adm. Code Phar 8.02(3)(d)5., (3)(e)2. Case #LS0406248PHM

DENNIS L DAWIEDCZYK RPH**JANESVILLE WI****REPRIMAND/FORFEITURES/COSTS**

Maintained incomplete schedule V controlled substances registers. Dated 6-24-2004. Wis. Stat. 450.10(1)(a)2., (1)(b)1., 961.23(4); Wis. Adm. Code Phar 8.02(3)(d)5., (3)(e)2. Case #LS0406244PHM

DUANE A OESTREICH RPH**APPLETON WI****STAYED SUSPENSION/LIMITED/COSTS**

Diverted drugs from his employer for self medication. Dated 12-10-2002. Case #LS0212101PHM

JENNIFER J SKIFTON RPH**ONALASKA WI****REPRIMAND/FORFEITURES/COSTS**

Failed to recognize and seek clarification of a deficient prescription order which harmed a patient. Dated 10-13-2004. Wis. Stat. 450.10(1)(b)1.; Wis. Adm. Code Phar 10.03(2). Case #LS0410133PHM

PHARMACY BUYING GROUP OF AMERICA**MEQUON WI****REPRIMAND/COSTS/FORFEITURES**

The facility failed to meet security requirements and engaged in activities requiring a distributor license without having a license. Dated 8-13-2003. Wis. Stat. 450.07(2); Wis. Adm. Code Phar 13.10(4). Case #LS0308131PHM

SELECT SPECIALTY HOSPITAL**MILWAUKEE WI****COSTS/FORFEITURES**

The establishment failed to have a centrally monitored alarm system. Dated 8-13-2003. Wis. Adm. Code Phar 6.08. Case #LS0308133PHM

JOHN A HOGDEN RPH**BLACK RIVER FALLS WI****REPRIMAND/COSTS**

Dispensed the incorrect medication to two different patients on two separate occasions. Dated 6-24-2004. Wis. Adm. Code Phar 10.03(2). Case #LS0406246PHM

MITCHEL C HIPLER RPH**TOMAHAWK WI****REPRIMAND/COSTS/FORFEITURES**

On two occasions continued to work after his license expired. Dated 10-13-2004. Wis. Stat. 450.03, 450.10(1)(a)2., (1)(b)2. and (2). Wis. Adm. Code Phar 10.03(19). Case #LS0410131PHM

AMERICAN HOMEPATIENT INC**MADISON WI****COSTS/FORFEITURES**

An inspection revealed that the facility had inoperable or missing audible alarms for its five entry doors. Dated 8-13-2003. Wis. Adm. Code Phar 13.10(4). Case #LS0308132PHM

VISITING NURSE HOME MEDICAL SERVICE**KENOSHA WI****REPRIMAND/COSTS/FORFEITURES**

From June 1, 2000, continuing through April 17, 2003, Visiting Nurse Home Medical Service operated as a wholesale distributor of drugs without a valid Wisconsin distributor license. Dated 11-11-2003. Wis. Stat. 450.07(2). Case #LS0311112PHM

GARY S INHOFF RPH**HAYWARD WI****REPRIMAND/FORFEITURES/COSTS**

Routinely left prescriptions for customer pick-up after pharmacy hours at the courtesy counter of the grocery where the pharmacy he manages is located. Also allowed unlicensed people to transfer

prescriptions to patients without a pharmacist present to provide a consultation. Dated 6-24-2004. Wis. Adm. Code Phar 7.01(1)(e) and (em), 10.03(6). Case #LS0406247PHM

**BARBARA TELLIER RPH
WASHBURN WI**

REPRIMAND/FORFEITURES/COSTS

On four occasions allowed an unlicensed employee to transfer a prescription to a patient. Dated 6-24-2004. Wis. Adm. Code Phar 7.01(1)(e) and (em). Case #LS04062410PHM

**KENNETH R LUCKOW RPH
WEST BEND WI**

REPRIMAND/FORFEITURES/COSTS

Allowed prescriptions to be dispensed to clients by unlicensed staff without providing a consultation by a pharmacist. 12-10-2003 Case #LS0312101PHM

**MICHAEL D HILLER R.PH
COTTAGE GROVE WI STAYED
SUSPENSION/LIMITED/COSTS**

Diverted hydrocodone, oxycodone, Oxycontin, and Lorazepam from his employer for his personal use. Dated 8-11-2004. Case #LS0408114PHM

**ROBERT J BOGAUDO RPH
VULCAN MI**

REPRIMAND/COSTS/FORFEITURES

Worked as a pharmacist without a valid pharmacist license between May 2002 and January 2003. Dated 8-11-2004. Wis. Adm. Code Phar 10.03(19). Case #LS0408113PHM

**WILLIAM F TACCOLINI RPH
MENOMINEE MI**

REPRIMAND/COSTS/FORFEITURES

As a managing pharmacist allowed an unlicensed employee to work as a pharmacist. Dated 6-24-2004. Wis. Adm. Code Phar 10.03(10). Case #LS0406249PHM

**BAY AREA MEDICAL CENTER PHARMACY
MARINETTE WI
COSTS/FORFEITURES**

The establishment allowed an employee to work in the establishment as a pharmacist without a valid Wisconsin license. Dated 6-24-2004. Wis. Adm. Code Phar 10.03(10). Case #LS0406245PHM

**JANE M MARTY RPH
LAKE MILLS WI**

REPRIMAND/LIMITED/COSTS

When she received a prescription for an eleven month old baby for Phenobarbital Elixir and realized the pharmacy did not have any, dispensed

Phenobarbital instead and instructed the patient's mother to crush one tablet and feed it to the baby. As a result the baby was later hospitalized for an overdose. Dated 10-13-2004. Wis. Stat. 450.10(1)(a)6.; Wis. Adm. Code Phar 10.03(2). Case #LS0410132PHM

**TYRONE C PERRON RPH
WEST ALLIS WI**

SUSPENDED/COSTS

Driving his personal automobile when another driver angered him. Pulled up next to the car and shot a pellet gun at the driver's side window causing the other driver to be struck in the face with glass shards. The other driver, a Milwaukee Police Detective, notified authorities. When he was apprehended, police found knives in his boots, a pellet gun and an expandable police baton in the passenger compartment, and a pistol in the trunk. He stated to authorities that he has anger management problems. As a condition to lifting the suspension, must undergo a mental health assessment which shall provide proof acceptable to the board that he does not suffer from any psychological or psychiatric condition which impairs his ability to practice as a pharmacist. Dated 2-11-2004. Wis. Stat. 450.10(1)(a)2. Case #LS0402111PHM

**ALVAREZ CORPORATION AND LEONEL
ALVAREZ
MILWAUKEE WI**

ADMINISTRATIVE INJUNCTION

Own and operate Carniceria El Campesino, a business regularly engaged in the retail sale of groceries, sundries and associated products. During a period extending from at least May, 2002, offered for sale and delivery to the public certain prescription drugs including but not limited to amoxicillin, ampicillin, and synalar. During the same time period respondents through employees, agents, business entities and/or contractors sold such prescription drugs to the general public at a profit and without validly issued prescriptions. Dispensing of a prescription drug may only be performed by a pharmacist or person licensed to prescribe such drugs, and if performed by a pharmacist must occur in a licensed pharmacy. Dated 11-03-2004. Wis. Stat. 440.21. Case #LS0411032UNL

**EL REY MEXICAN PRODUCTS INC
ERNESTO VILLARREAL and
M. OLIVIA VILLARREAL
MILWAUKEE WI/WAUKESHA WI
ADMINISTRATIVE INJUNCTION**

Own and operate Mercado El Rey, a business regularly engaged in the retail sale of groceries,

sundries and associated products. During a period extending from at least May 2002 until at least September 2002, offered for sale and delivery to the public certain prescription drugs including but not limited to amoxicillin, ampicillin, tessalon benzonate, and synalar. During the same time period through employees, agents, business entities and/or contractors sold such prescription drugs to the general public at a profit and without validly issued prescriptions. Dispensing of a prescription drug may only be performed by a pharmacist or person licensed to prescribe such drugs, and if performed by a pharmacist must occur in a licensed pharmacy. Dated 10-13-2004. Wis. Stat. 440.21. Case #LS0410139UNL

MEDRX PHARMACEUTICALS

DISTRIBUTORS INC

GLEN ELLYN IL

ADMINISTRATIVE INJUNCTION

Beginning in May 2002 and continuing through May 2004 sold a limited line of non-controlled prescription pharmaceuticals to retail pharmacies in Wisconsin. At no time were they licensed as a distributor. Distributing a prescription drug may only be performed by a person licensed to distribute such drugs. Dated 10-21-2004. Wis. Stat. 440.07. Case #LS041021UNL

HEATHER MURPHY POLLARD

FORT COLLINS CO

ADMINISTRATIVE INJUNCTION

From January 1999 to June 2001 owned and operated The Academy For Natural Health, a business in Waukesha, WI, and shared a suite with a physician. Took samples of Arthrotec, a prescription drug, with the physician's consent and gave to a client. Dated 6-4-2004. Wis. Stat. 448.03(1)(a), 450.03(1). Case #LS0406041UNL

TELEPHONE DIRECTORY -- QUICK KEYS

To contact the Department, just dial (608) 266-2112, then enter the Quick Key numbers below for the assistance you need:

To request an application packet:	press 1-1-3
To check the status of a pending application:	press 1 - 2
To discuss application questions:	press 1 - 3
To discuss temporary license questions:	press 1 - 3
To renew or reinstate a permanent license:	press 1 - 4
To renew or reinstate a permanent license:	press 2 - 1
To renew a temporary license:	press 2 - 2
To obtain proof of licensure to another state:	press 3 - 1
To find out if a person is licensed:	press 3 - 2
To file a complaint on a license holder:	press 8
To check the status of complaints:	press 8
For all other licensing questions:	press 1 - 3

VERIFICATIONS

Verifications are now available online at www.drl.state.wi.us. On the Department Web site, please click on "License Lookup". If you do not use the online system, all requests for verification of licenses/credentials must be submitted in writing. There is no charge for this service. Requests should be sent to the Department address or may be faxed to (608) 261-7083 - ATTENTION: VERIFICATIONS. Requests for endorsements to other states must be made in writing – please include \$10 payable to the Department.

DID YOU KNOW THAT YOU CAN ACCESS MOST INFORMATION ON THE DEPARTMENT OF REGULATION & LICENSING WEB SITE?

Visit the Department's Web site at:

drl.wi.gov

Send comments to: web@drl.state.wi.us

CHANGE OF NAME OR ADDRESS?

Please send changes to the Department. Confirmation of changes is not automatically provided. **WIS. STATS. S. 440.11 ALLOWS FOR A \$50 PENALTY TO BE IMPOSED WHEN CHANGES ARE NOT REPORTED WITHIN 30 DAYS.**